

IC 4-1-12

Chapter 12. Implementation of the Patient Protection and Affordable Care Act

IC 4-1-12-1

"Patient Protection and Affordable Care Act"

Sec. 1. As used in this chapter, "Patient Protection and Affordable Care Act" refers to the federal Patient Protection and Affordable Care Act (P.L. 111-148), as amended by the federal Health Care and Education Reconciliation Act of 2010 (P.L. 111-152), as amended from time to time, and regulations or guidance issued under those acts.

As added by P.L.160-2011, SEC.1.

IC 4-1-12-2

"Health plan"

Sec. 2. As used in the chapter, "health plan" means a policy, contract, certificate, or agreement offered or issued:

- (1) by an entity that assumes or carries insurance risk; and
- (2) to provide, deliver, arrange for, pay for, or reimburse the costs of health care services.

As added by P.L.160-2011, SEC.1.

IC 4-1-12-3

Prohibition on requiring an individual to purchase health plan coverage

Sec. 3. Notwithstanding any other law, a resident of Indiana may not be required to purchase coverage under a health plan. A resident may delegate to the resident's employer the resident's authority to purchase or decline to purchase coverage under a health plan.

As added by P.L.160-2011, SEC.1.

IC 4-1-12-4

Investigation of specified provisions of act; authority to apply for a waiver

Sec. 4. The office of the secretary of family and social services and the department of insurance:

- (1) shall investigate; and
- (2) may apply for a waiver under;

42 U.S.C. 18052 of the Patient Protection and Affordable Care Act.

As added by P.L.160-2011, SEC.1.